

MTS2024-0024

AUG 05 1987

REF: 840

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Mr. Raymond Reede  
Murphy Oil USA, Inc.  
P. O. Box 547  
Poplar, Montana 59255

EPA 60 51195421 08/19/87  
NOTIFY SENDER OF NEW ADDRESS  
EPA  
999 18TH ST 500  
DENVER CO 80202-2413

U.S. Environmental Protection Agency  
Drinking Water Division  
1860 Lincoln Street  
Denver, CO 80295  
Re: Plugging and Abandonment  
SWD Well No. 29-D  
East Poplar Unit  
Roosevelt County, Montana

Dear Mr. Reede:

Your proposed plan for plugging and abandoning Salt Water Disposal Well Number 29-D in the East Poplar Unit is hereby approved. This abandonment must be completed within 60 days of the date of this approval letter. Please notify Jim Boyter in our Montana Office in Helena at 449-5486 at least two weeks prior to your proposed plugging date so that he might arrange to have an inspector witness the work.

Please also be reminded that in a letter dated January 2, 1987, Murphy Oil was allowed to delay the plugging and abandonment of the Mule Creek Allotted 1-D salt water disposal well in the Northeast Benrud Field until July. Since July has almost drawn to a close, this well needs to be plugged and abandoned immediately.

Enclosed is a copy of our Plugging Record. Please complete this form for each well and return it to the Environmental Protection Agency within 60 days of the plugging and abandonment of a well.

If you have any additional questions, please contact Mr. Boyter in our Helena Office.

Sincerely,  
Original signed by  
Jack W. Hoffbuhr

Max H. Dodson  
Director  
Water Management Division

Enclosure

ENGLE:fa/7/28/87/4090 (1)



EPA 738  
P 168 880 804

**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3811, July 1983 447-845

PS Form 3800, Feb. 1982

Sent to Mr. Raymond Reede	
Murphy Oil USA, Inc.	
P.O. Box 547	
P.O., State and ZIP Code	
Poplar, MT 59255	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3811, July 1983 447-845

8-7-C

DOMESTIC RETURN RECEIPT

<p><b>SENDER: Complete items 1, 2, 3 and 4.</b></p> <p>Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery.</u> For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.</p>	
<p>1. <input type="checkbox"/> Show to whom, date and address of delivery.</p> <p>2. <input type="checkbox"/> Restricted Delivery.</p>	
<p>3. Article Addressed to:</p> <p>Mr. Raymond Reede Murphy Oil USA, Inc. P.O. Box 547 Poplar, MT 59255</p>	
<p>4. Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail</p>	<p>Article Number</p> <p>P168 880 804</p> <p>EPA 738</p>
<p>Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b></p>	
<p>5. Signature - Addressee</p> <p>X <i>Sharon Bravard</i></p>	
<p>6. Signature - Agent</p> <p>X</p>	
<p>7. Date of Delivery</p> <p>8/11/87</p>	
<p>8. Addressee's Address (ONLY if requested and fee paid)</p>	



## PLUGGING AND ABANDONMENT PLAN

NAME AND ADDRESS OF FACILITY

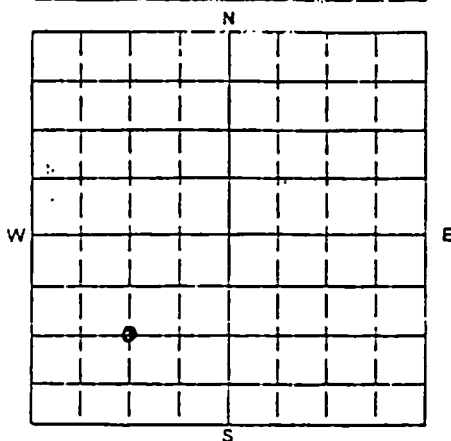
Murphy Oil USA, Inc.  
P.O. Box 547  
Poplar, MT 59255

NAME AND ADDRESS OF OWNER/OPERATOR

Murphy Oil USA, Inc.  
200 Peach Street

JUL 13 1987

MONTANA DESIDE

LOCATE WELL AND OUTLINE UNIT ON  
SECTION PLAT — 640 ACRES

STATE

MT

COUNTY

Roosevelt

PERMIT NUMBER

SURFACE LOCATION DESCRIPTION

1/4 OF SW 1/4 OF SW 1/4 SECTION 28 TOWNSHIP 29N RANGE 51E

LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT

Surface Location 660 ft. from (N/S) S Line of quarter section  
and 660 ft. from (E/W) W Line of quarter section

TYPE OF AUTHORIZATION

- ☒ Individual Permit  
☐ Area Permit  
☐ Rule

Number of Wells 1

Lease Name EPU

WELL ACTIVITY

- ☐ CLASS I  
☒ CLASS II  
☒ Brine Disposal  
☐ Enhanced Recovery  
☐ Hydrocarbon Storage  
☐ CLASS III

Well Number 29-D

## CASING AND TUBING RECORD AFTER PLUGGING

SIZE	WT(LB/FT)	TO BE PUT IN WELL (FT)	TO BE LEFT IN WELL (FT)	HOLE SIZE
13 3/8	48#		156.45	17 1/2
9 5/8	36#		996.44	12 1/4
5 1/2	15.5#		3888	8-3/4

## METHOD OF EMPLACEMENT OF CEMENT PLUGS

- ☒ The Balance Method  
☐ The Dump Bailer Method  
☐ The Two-Plug Method  
☐ Other

## CEMENTING TO PLUG AND ABANDON DATA:

	PLUG #1	PLUG #2	PLUG #3	PLUG #4	PLUG #5	PLUG #6	PLUG #7
Size of Hole or Pipe in which Plug Will Be Placed (inches)	9-5/8	9-5/8					
Depth to Bottom of Tubing or Drill Pipe (ft.)	803	80					
Sacks of Cement To Be Used (each plug)	50	25					
Slurry Volume To Be Pumped (cu. ft.)	57.5	28.75					
Calculated Top of Plug (ft.)	803	14					
Measured Top of Plug (if tagged ft.)							
Slurry Wt. (Lb./Gal.)							
Type Cement or Other Material (Class III)							

## LIST ALL OPEN HOLE AND/OR PERFORATED INTERVALS AND INTERVALS WHERE CASING WILL BE VARIED (If any)

From	To	From	To
853	887		

Estimated Cost to Plug Wells

\*A cmt retainer will be set at 803' and squeeze 50 sks cmt into formation and pump a 25 sk plug at the surface.

\$10,000.00

## CERTIFICATION

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

NAME AND OFFICIAL TITLE (Please type or print)

Raymond Reede  
District Manager

SIGNATURE

DATE SIGNED

7/10/87



MTS 2024-0024

## EPA Form 7520-11 (2-84)





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460

# ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

NAME AND ADDRESS OF EXISTING PERMITTEE

Murphy Oil USA, Inc.  
200 Peach Street  
El Dorado, Ar 71730

NAME AND ADDRESS OF SURFACE OWNER

Zimmerman Inc.  
P.O. Box 277  
Poplar, MT 59255

LOCATE WELL AND OUTLINE UNIT ON  
SECTION PLAT — 640 ACRES

STATE

COUNTY

MT

Roosevelt

PERMIT NUMBER	
---------------	--

MT521PE-0024

SURFACE LOCATION DESCRIPTION

1/4 OF SW    1/4 OF SW    1/4 SECTION 28    TOWNSHIP 29N    RANGE 51E

LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT

Surface  
Location 660 ft. from (N/S) S Line of quarter section  
and 660 ft. from (E/W) W Line of quarter section

WELL ACTIVITY

TYPE OF PERMIT

☒ Brine Disposal

☐ Enhanced Recovery

### ☐ Hydrocarbon Storage

☒ Individual!

**Area**

Number of Wells 1

Lease Name East Poplar Unit Well Number 29-D

### INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING — CASING ANNULUS PRESSURE  
(OPTIONAL MONITORING)

MONTH YEAR

**AVERAGE PSIG**

MAXIMUM PSIG

88L

MCF

MINIMUM PSIG

MAXIMUM PSIG

NO WATER DISPOSED OF DURING YEAR

*I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32).*

NAME AND OFFICIAL TITLE (Please type or print)

Raymond Reede  
District Superintendent

**SIGNATURE**

Russard Reed

DATE SIGNED

1-9-87



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460

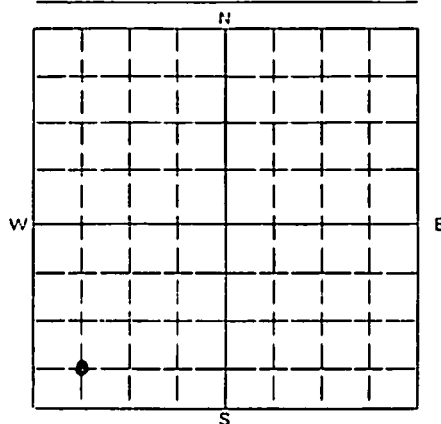
## ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

0024

## NAME AND ADDRESS OF EXISTING PERMITTEE

Murphy Oil USA, Inc.  
200 Peach Street  
El Dorado, AR 71730

## NAME AND ADDRESS OF SURFACE OWNER

Zimmerman Inc.  
P.O. Box 277  
Poplar, MT 59255LOCATE WELL AND OUTLINE UNIT ON  
SECTION PLAT — 640 ACRES

STATE

MT

COUNTY

Roosevelt

PERMIT NUMBER

MTS21PE-0024

## SURFACE LOCATION DESCRIPTION

1/4 OF SW 1/4 OF SW 1/4 SECTION 28 TOWNSHIP 29N RANGE 51E

LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT

Surface  
Location 660 ft. from (N/S) S Line of quarter section

and 660 ft. from (E/W) W Line of quarter section

## WELL ACTIVITY

## TYPE OF PERMIT

☒ Brine Disposal☒ Individual☐ Enhanced Recovery☐ Area☐ Hydrocarbon Storage

Number of Wells 1

Lease Name East Poplar Unit Well Number 29-D

## INJECTION PRESSURE

## TOTAL VOLUME INJECTED

TUBING — CASING ANNULUS PRESSURE  
(OPTIONAL MONITORING)

MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
1	- 1985	600	600	111,735	0	0	0
2	- 1985	600	610	97,464	0	0	0
3	- 1985	600	600	121,918	0	0	0
4	- 1985	580	580	147,215	0	0	0
5	- 1985	580	580	118,634	0	0	0
6	- 1985	580	580	113,020	0	0	0
7	- 1985	560	560	127,128	0	0	0
8	- 1985	590	590	129,818	0	0	0
9	- 1985	620	650	124,227	0	0	0
10	- 1985	620	780	90,868	0	0	0
11	- 1985	0	0	0	0	0	0
12	- 1985	0	0	0	0	0	0

## CERTIFICATION

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32).

NAME AND OFFICIAL TITLE (Please type or print)

Raymond Reede  
District Superintendent

SIGNATURE

DATE SIGNED

1-22-86



DB

0024

Casing/Tubing Annulus  
Pressure Test

MTS21PE ~~0024~~

Name of Company: Murphy Oil Corporation Date: 9/27/85  
Name of Well: #29-D Welch Permit No.: \_\_\_\_\_  
Name of Field East Poplar County: Roosevelt  
Location of Well: SW 1/4 SW 1/4 Sec. 28 T-29N R-51E  
Type of Well: SWD X ER \_\_\_\_\_ Total Depth: 5875 Ft.  
Type of Packer: Baker Model "AD-1"  
Packer Setting Depth: 766  
Surface Casing Size: 13 3/8 From: 0 Ft. To 162 Ft.  
Casing Size: 9 5/8 From: 0 Ft. To 1002 Ft.  
Tubing Size: 2 7/8 Amount: 766  
Time of Test: 12:25 PM Pressure Gauge Reading:

0 Min:

\_\_\_\_\_ Could not obtain pressure.  
Casing leak.

5

\_\_\_\_\_ Ray Reede notified.

10

15

20

25

30

35

40

45

50

55

60

Failed Test  
WE Engle

Inspected by:

James Rowe  
James Rowe



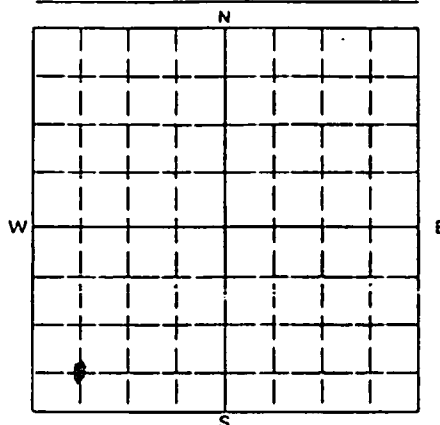


## ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

NAME AND ADDRESS OF EXISTING PERMITTEE

Murphy Oil USA, Inc.  
P.O. Box 547  
Poplar, MT 59255

NAME AND ADDRESS OF SURFACE OWNER

Zimmerman Inc.  
P.O. Box 277  
Poplar, MT 59255LOCATE WELL AND OUTLINE UNIT ON  
SECTION PLAT — 640 ACRES

STATE

MT

COUNTY

Roosevelt

PERMIT NUMBER

MTS21PE-0024

SURFACE LOCATION DESCRIPTION

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and 660 ft. from (E/W) W Line of quarter section

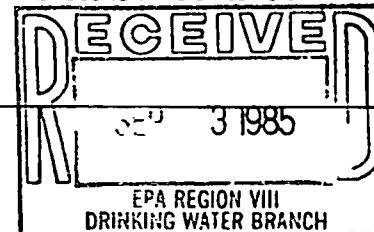
WELL ACTIVITY

TYPE OF PERMIT

☒ Brine Disposal☐ Individual☐ Enhanced Recovery☐ Area☐ Hydrocarbon Storage

Number of Wells 1

Lease Name East Poplar Unit Well Number 29-D



INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING — CASING ANNULUS PRESSURE  
(OPTIONAL MONITORING)

MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
8-84		600	600	44,587		0	0
9-84		600	600	87,671		0	0
10-84		600	610	107,181		0	0
11-84		600	600	104,322		0	0
12-84		600	600	111,861		0	0
1-85		600	600	111,735		0	0
2-85		600	610	97,464		0	0
3-85		600	600	121,918		0	0
4-85		580	580	147,215		0	0
5-85		580	580	118,634		0	0
6-85		580	580	113,020		0	0
7-85		560	560	127,128		0	0

## CERTIFICATION

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NAME AND OFFICIAL TITLE (Please type or print)

Raymond Reede  
District Superintendent

SIGNATURE

DATE SIGNED

8/27/85

Casing/Tubing Annulus  
Pressure Test

DB 0024

Name of Company: Murphy Oil Corporation Date: 9/27/85  
Name of Well: #29-D Welch Permit No.: \_\_\_\_\_  
Name of Field East Poplar County: Roosevelt  
Location of Well: SW 1/4 SW 1/4 Sec. 28 T-29N R-51E  
Type of Well: SWD X ER \_\_\_\_\_ Total Depth: 5875 Ft.  
Type of Packer: Baker Model "AD-1"  
Packer Setting Depth: 766  
Surface Casing Size: 13 3/8 From: 0 Ft. To 162 Ft.  
Casing Size: 9 5/8 From: 0 Ft. To 1002 Ft.  
Tubing Size: 2 7/8 Amount: 766  
Time of Test: 12:25 PM Pressure Gauge Reading:

0 Min:

\_\_\_\_\_ Could not obtain pressure.  
Casing leak.

5

\_\_\_\_\_ Ray Reede notified.

10

15

20

25

30

35

40

45

50

55

60

Failed Test  
WE Engle

Inspected by: \_\_\_\_\_

James Rowe  
James Rowe



ENVIRONMENTAL PROTECTION  
AGENCY  
OCT 11 1985  
MONTANA OFFICE





EPA Compliance Correspondence

Operator Response  
to Correspondence

Well located: 28 029N 051E  
FORT PECK  
POPLAR EAST, ROOSEVELT Co.  
29-D  
MT00024  
2D  
MT2024-00024